

Department of Health and Social Services

DIVISION OF PUBLIC HEALTH Section of Epidemiology

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Botulism Checklist for Public Health Nurses:

Signs and symptoms:

- ☐ Establish the presence of **signs and symptoms** consistent with botulism¹:
 - recent (1-10 days) consumption of traditionally prepared Native foods (seal, whale, salmon, beaver tail or paw, seal oil, etc.) or home canned foods (tomatoes, green beans)
 - neurological: dry mouth, dysphagia, diplopia, blurry vision, bilateral dilated or unreactive pupils
 - gastrointestinal/urinary: abdominal pain, diarrhea, intestinal ileus, nausea, vomiting, urinary retention
 - muscular: dyspnea, fatigue, respiratory muscle paralysis, symmetrical skeletal weakness
- **Report and identify suspected food source:** ☐ Call Section of Epidemiology (SOE) and report any suspect botulism cases immediately: 907-269-8000, Monday - Friday, 8:00 - 5:00 or 1-800-478-0084, after hours ☐ Verify **food history** with patient(s) or others regarding what traditionally prepared Native foods were eaten. Advise about risks associated with consumption: http://dhss.alaska.gov/dph/Epi/id/Documents/01-Internal/MMM Chapter BotulismFoodborne.pdf ☐ Interview any others who may have shared the meal. Review signs and symptoms of botulism; advise to D/C consumption of the suspected food(s) and seek immediate medical care if symptoms develop. Ensure contacts are safe and monitored for 10 days. Not everyone who consumes the same food may become ill with botulism toxicity. (See monitoring form) ☐ Facilitate safe collection and shipment of suspect food samples. Alaska State Public Health Laboratory (ASPHL) 907-334-2100 can provide guidance on food collection and shipment. Seal all oil or liquid samples with duct tape. Address to **Special Pathogens, ASPHL** and include *Anchorage Lab Request Form*. http://www.dhss.alaska.gov/dph/Labs/Documents/LaboratoryTests.pdf □ Collaborate with SOE, Health Aide and hospitals to monitor contacts and treat (BAT) subsequent cases. **REQUIRED** specimens* Collect blood before administration of antitoxin! □ 20 mls of whole blood (no anticoagulant) or 10 mls serum. Note collection time on lab slip. □ 10-50 grams of stool (prefer before antitoxin, can be collected at any time)



Think 20-10 before antitoxin!

- □ 20 mls of emesis or gastric aspirates
- ☐ Collect **suspected food(s)** if available, **refrigerate**, and ship to ASPHL.
- *Epi Nurse will track all lab specimens and request assistance to collect as needed

Botulism in Alaska-A guide for physicians and health care providers 2011: http://dhss.alaska.gov/dph/Epi/id/Pages/botulism/monograph.aspx P:\Infectious\INFT-TB\2015 MMM\Botulism - Foodborne (updated 10/2/2015).